

95316284

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7575

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Douglas Aircraft Company, C1-Q8C (11-11) Attn: Rob Tuell 3855 Lakewood Blvd. Long Beach, CA 90846		C A D 0 8 6 5 1 0 0 0 5 1 6 2 8 4		A. State Manifest Document Number 95316284	
4. Generator's Phone (310) 496- 6287 or (310) 593- 3101		6. US EPA ID Number		B. State Generator's ID H A H Q 3 6 0 0 5 6 9 8	
5. Transporter 1. Company Name Laidlaw Environmental Services of CA, Inc.		C A D 0 0 0 0 8 3 1 2 1		C. State Transporter's ID 448027	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (310) 518- 4700	
9. Designated Facility Name and Site Address Norris Environmental Services 5215 South Boyle Avenue Los Angeles, CA 90058		C A D 0 9 7 0 3 0 9 9 3		E. State Transporter's ID	
10. US EPA ID Number		G. State Facility ID C A D 0 9 7 0 3 0 9 9 3		F. Transporter's Phone	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
Waste sodium hydroxide solution, 8, UN1824, PG II, (D002) RQ, (D002) 284 of 26-95		001 TT		28120	P
c.					
d.					
11a. Additional Descriptions for Materials Listed Above 109 of 26-95 11a. E0106200005AK. Sodium hydroxide solution from tank T-9 cleaning Tank T9 at C6 Facility DMJM Wastewater Treatment System.		K. Handling Codes for Wastes Listed Above a. 01		b.	
15. Special Handling Instructions and Additional Information 24 Hour emergency telephone number (800) 424- 9300 (Chemtrec). DOT ERG# 11a) 60 Site address: 19503 South Normandie Avenue, Torrance, CA 90502.		c.		d.	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Robert G. Tuell, Jr.		Signature <i>Robert G. Tuell, Jr.</i>		Month Day Year 04 26 95	
17. Transporter 1. Acknowledgement of Receipt of Materials Printed/Typed Name Jamie Hunt		Signature <i>Jamie Hunt</i>		Month Day Year 04 26 95	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Juanito Chiu					
Signature <i>Juanito Chiu</i>				Month Day Year 04 26 95	

DO NOT WRITE BELOW THIS LINE.

95316284

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TRANSPORTER
FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
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4. Generator's Phone (310) 496-6287 or (310) 593-3101		6. US EPA ID Number		B. State Generator's ID HAHQ36005698		
5. Transporter 1 Company Name Laidlaw Environmental Services of CA, Inc.		C A D 0 0 0 0 8 3 1 2 1		C. State Transporter's ID 448027		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (310) 518-4700		
9. Designated Facility Name and Site Address Norris Environmental Services 5215 South Boyle Avenue Los Angeles, CA 90058		10. US EPA ID Number C A D 0 9 7 0 3 0 9 9 3		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone (213) 588-7111		
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	I. Waste Number
Waste sodium hydroxide solution, 8, UN1824, PG II, (D002) RQ, (D002) 213-9-26-95		No. Type 001 TT		28120	P	State 122 EPA/Other D002
c.						State EPA/Other
d.						State EPA/Other
11a. Additional Descriptions for Materials Listed Above 100 gal. of 26-95 Tank T9 at C6 Facility DMJM Wastewater Treatment Systems		K. Handling Codes for Wastes Listed Above a. b. c. d.				
15. Special Handling Instructions and Additional Information 24 Hour emergency telephone number (800) 424-9300 (Chemtrec). DOT ERG# 11a) 60 Site address: 19503 South Normandie Avenue, Torrance, CA 90502.						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Robert G. Tuell, Jr.		Signature <i>Robert G. Tuell, Jr.</i>		Month Day Year 04 26 95		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Jamie Hunt		Signature <i>Jamie Hunt</i>		Month Day Year 04 26 95		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day Year						

DO NOT WRITE BELOW THIS LINE.

NORRIS ENVIRONMENTAL SERVICES

LAND DISPOSAL RESTRICTION NOTIFICATION

Pursuant to CCR Title 22, section 66268.7 (40 CFR 268.7 (a)), I hereby notify that this waste shipment contains one or more of the following wastes restricted under the land disposal restrictions for which applicable treatment standards are set forth in CCR Title 22, section 66268.40 (40 CFR 268.40)

MANIFEST NUMBER 16284/25316284 GENERATOR NAME Douglas Aircraft Co EPA # CADC86510005

RCRA HAZARDOUS WASTE INFORMATION

N.E.S. PROFILE NUMBER/ MANIFEST LINE ITEM NUMBER	LIST ALL D, F, K, U & P CODES	SUBCATEGORY (IF ANY)	WASTEWATER* NONWASTEWATER WW	NW	CALIFORNIA LIST** per CCR Title 22, Section 66268.32	HAZARDOUS DEBRIS SUBJECT TO CCR Title 22, Sec. 66268.45
EC106200000SAK	D002	Alkaline	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> For: _____	<input type="checkbox"/>

ADDITIONAL INFORMATION FOR D001, D002, D012-43, F001-005 & F039 WASTE STREAMS: (check one)

- ☒ There are no underlying hazardous constituents (UHCs) present
- ☐ There are underlying hazardous constituents (UHCs) present which do not meet treatment standards per CCR Title 22, Section 66268.48
(Use the attached UTS Table and check the appropriate constituent (s) present in the waste stream)

DETERMINATION BASED UPON: (check one)

- ☒ Knowledge of the process generating the waste and the raw materials used and the reaction products
- ☐ Results from analytical testing Analytical results attached ☐ YES ☐ NO

TERM DEFINITIONS

* WASTEWATER - per CCR Title 22, section 66260.10, WASTE THAT CONTAINS LESS THAN 1% BY WEIGHT TOTAL ORGANIC CARBON (TOCs) AND/OR 1% BY WEIGHT TOTAL SUSPENDED SOLIDS (TSS).

** CALIFORNIA LIST - THE FOLLOWING HAZARDOUS WASTES ARE PROHIBITED FROM LAND DISPOSAL: per CCR Title 22, Section 66268.32

- Liquid hazardous waste with a pH less than or equal to 2.0
- Liquid hazardous waste containing PCB's at concentration of greater than or equal to 50 ppm
- Liquid hazardous waste, including free liquids associated with any solids/sludge, containing free cyanide at concentrations greater than or equal to 1,000 mg/L
- Liquid hazardous waste, including free liquids associated with any solids/sludge, containing metals at concentrations greater than or equal to the following:

ARSENIC	500 mg/L	MERCURY	20 mg/L
CADMIUM	100 mg/L	NICKEL	134 mg/L
CHROMIUM (VI)	500 mg/L	SELENIUM	100 mg/L
LEAD	500 mg/L	THALLIUM	130 mg/L
- Liquid hazardous waste, that contains HOC's in total concentration greater than or equal to 1,000 mg/L
- Non-liquid RCRA hazardous waste containing HOC's in total concentration greater than or equal to 1,000 mg/L

CERTIFICATION

I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing, or through knowledge of the process generating the waste, to support this certification. I believe that the information that I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Douglas Aircraft Company

COMPANY NAME

Senior Plant Engineer

TITLE

Robert G. Tuell, Jr.

AUTHORIZED SIGNATURE

Robert G. Tuell, Jr.

PRINTED NAME

04-26-95

DATE

WORK ORDER



221 E. "D" ST. • P.O. Box 1175
WILMINGTON, CA 90748-1175
(310) 518-4700 • (800) 955-5359

CUSTOMER/ACCT. NO

240120

WORK ORDER NO.

13040
14039

BILLING ADDRESS

DOUGLAS AIRCRAFT
190TH X NORMANDIE
TORRANCE CA

SERVICE ADDRESS

SAME

*called
51650508009
Paul H6316*

ORDER DATE	DATE TO BE DONE	CUSTOMER P.O. #	ORDERED BY	TELEPHONE#	CONTACT PERSON
04/24/95	04/26/95	27064-H6316	FRED WENDLAND	(310) 4089104	
REP. OF	DIV. #	DEPARTMENT	CUSTOMER'S EPA #	CUSTOMER'S BD OF EQUAL #	CONTACT PHONE #
DF	516-500	TRANS			() () ()

IN YARD 0600 ON SITE 0700

1 VAC TRK P/U LOAD OF SODIUM HYDROXIDE HAUL TO NORRIS

Douglas am: 0700

dep: 1400

DRIVER COMPLETE:

SERVICES PERFORMED

*BLDG 45 p/o Tank #9
and rinse out sludge. Transport
to norris disposal, for dumping.*

START TIME 0600

STOP TIME

START MILES 488424

END MILES

TRUCK NUMBER 16045

TRAILER NUMBER 16045T

Manifest Number

95316284

Date Completed

4-26-95

Drivers Name

Jamie

Comments

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature

Robert G. Tull, Jr. 04-26-95

PRICING INSTRUCTIONS - DRUMS

Clerical _____	Hrs. @ _____	Per Hr. _____
Project Manager _____	Hrs. @ _____	Per Hr. _____
First Technician _____	Hrs. @ _____	Per Hr. _____
Second Technician _____	Hrs. @ _____	Per Hr. _____
Third Technician _____	Hrs. @ _____	Per Hr. _____
Fourth Technician _____	Hrs. @ _____	Per Hr. _____
Fifth Technician _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____
Truck # _____	Hrs. @ _____	Per Hr. _____

Sundays, Holidays, and After Hours @ _____ % = _____

TRANSPORTATION & DISPOSAL FEES TO TSD FACILITY

_____ 5 Gal. Cans Liquid @ _____	Each
_____ 5 Gal. Cans Solid @ _____	Each
_____ 5 Gal. Cans Lab Packed @ _____	Each
_____ 55 Gal. Drums Liquid @ _____	Each
_____ 55 Gal. Drums Solid @ _____	Each
_____ 55 Gal. Drums Lab Packed _____	Each
_____ Empty 5 Gal. Cans @ _____	Each
_____ Empty 55 Gal. Cans @ _____	Each

County Tax _____

MATERIALS USED

_____ 5 Gal. Cans @ _____	Each
_____ 55 Gal. Drums @ _____	Each
_____ Recovery Drums @ _____	Each
_____ Bags Vermiculite @ _____	Each
_____ Bags (Other Describe) @ _____	@ _____ = _____
_____ Hazardous Waste Labels @ _____	Each
_____ Drum Liners @ _____	Each

Safety Equipment Number of Sets _____ @ _____ = _____

PRICING INSTRUCTIONS - PUMPING

Compensation _____	Hrs. @ _____	Per Hr. _____
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Washout Fee _____

Dump Fee _____

TOTAL _____

WEIGHT TICKET

VENDOR: Laidlaw GROSS 60,250 P
TRUCK #: 16045-16045T TARE 32,130 P
DATE: 4/26/95 NET 28,120 P
CONTENTS: Sodium Hydroxide Solution from Cleaning DMJM, T9
DISPOSAL FACILITY: Acorns Disposal DRUM COUNT
DRIVER: Jamie Hynt GALLONS

STATE MANIFEST DOCUMENT NUMBER: 95316284